



Merchant Account Maintenance Form

Please submit your request **by fax at (662) 642 3279** or email : **service@siampay.com**

Merchant Information

Merchant ID	Effective Date	/ / (DD/MM/YY)
Merchant Name		
Contact Person	Contact Number	

Payment Limit Upgrade *subject to Bank's approval (please tick the appropriate box(es))

Amount and Reason	<input type="checkbox"/> Payment Limit (Please provide supporting documents, e.g. product pricing plan, invoice copy, receipt etc) <input type="checkbox"/> Transaction Limit _____ <input type="checkbox"/> Daily Limit _____ <input type="checkbox"/> Monthly Limit _____ <input type="checkbox"/> Reason _____
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Merchant Profile Update (please tick the appropriate box(es))

1.	<input type="checkbox"/> Company Name _____
2.	<input type="checkbox"/> Account Number and Bank name _____
3.	<input type="checkbox"/> Business / Mailing Address _____
<i>Please provide the copy of the following documents for updating the item 1, 2 or 3:</i>	
a) Thailand Business Registration or Certificate of Incorporation ;	
b) the authorization letter if the update information is different from existing;	
c) Certificate of Change of Name (for items 1 and 2)	
4.	<input type="checkbox"/> Website URL _____
5.	<input type="checkbox"/> Contact Information (A: Add; D: Delete) A D
	<input type="checkbox"/> Project Contact : 1. Person _____, Tel _____, Email _____ <input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> Operation Contact : 1. Person _____, Tel _____, Email _____ <input type="checkbox"/> <input type="checkbox"/>
	2. Person _____, Tel _____, Email _____ <input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> Technical Contact : 1. Person _____, Tel _____, Email _____ <input type="checkbox"/> <input type="checkbox"/>
	2. Person _____, Tel _____, Email _____ <input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> Financial Contact : 1. Person _____, Tel _____, Email _____ <input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> Enquiry Hotline _____, <input type="checkbox"/> Fax Number _____
6.	<input type="checkbox"/> Datafeed URL _____
7.	<input type="checkbox"/> Change Password _____
8.	<input type="checkbox"/> Other _____

Additional Settings (please tick the appropriate box(es))

1.	<input type="checkbox"/> Secure Hash function	2.	<input type="checkbox"/> Auto retry failed datafeed (Please fill in the technical contact email at item 6)
3.	<input type="checkbox"/> Upload Company Logo	File name: _____ .jpg / .png / .gif (Suggested file size: 150 x 60 pixels)	
4.	<input type="checkbox"/> Domain/IP address checking	Domain name: _____ IP address: _____	
5.	<input type="checkbox"/> PayPal add-on	PayPal account email: _____ Currency: _____	
6.	<input type="checkbox"/> Merchant API Enable		

Merchant Signature & Company Chop: _____ Date: _____

AsiaPay Internal Use - Gateway: _____ Card: _____

Received by:	Date: / / (DD/MM/YY)
Updated Account by:	Date: / / (DD/MM/YY)